

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

545 E. TOWN ST

☐ Check if different than previously reported. (ACC)

COLUMBUS

OH

43215

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00290502

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

02

25

2016

03

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer THOMAS J RUEBEL

Signature of Treasurer

THOMAS J RUEBEL

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

07

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
02 25 2016 To: M M / D D / Y Y Y Y Y Y  
03 31 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">170830.19</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">177037.79</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">20159.74</span>	<span style="border: 1px solid black; padding: 2px;">40821.70</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">197197.53</span>	<span style="border: 1px solid black; padding: 2px;">211651.89</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">16170.39</span>	<span style="border: 1px solid black; padding: 2px;">30624.75</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">181027.14</span>	<span style="border: 1px solid black; padding: 2px;">181027.14</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2016

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

928.11

1024.26

(ii) Unitemized .....

19231.63

39797.44

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

20159.74

40821.70

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

20159.74

40821.70

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20159.74

40821.70

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

20159.74

40821.70

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	52.63	52.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	52.63	52.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	14250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	117.76	122.12
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	117.76	122.12
29. Other Disbursements .....	10000.00	16200.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16170.39	30624.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16170.39	30624.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20159.74	40821.70
34. Total Contribution Refunds (from Line 28(d)) .....	117.76	122.12
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20041.98	40699.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	52.63	52.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	52.63	52.63

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Steve Alonso

Mailing Address 1357 Helford Lane

City State Zip Code  
Carmel IN 46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2016

Transaction ID : SA11AI.303070

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Steve Alonso

Mailing Address 1357 Helford Lane

City State Zip Code  
Carmel IN 46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11AI.304301

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Steve Alonso

Mailing Address 1357 Helford Lane

City State Zip Code  
Carmel IN 46032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.305524

Amount of Each Receipt this Period

57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. DAVID GIRODAT**

Mailing Address 15410 MEADOWS

City  
FRASER

State  
MI

Zip Code  
48026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bancorp

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.304876

Amount of Each Receipt this Period

36.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. THOMAS HEIKS**

Mailing Address 548 VILLAGE SPRINGS SE

City  
ADA

State  
MI

Zip Code  
49301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bancorp

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.304878

Amount of Each Receipt this Period

38.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Jerry Kelsheimer**

Mailing Address 1432 Stone Court

City  
Westlake

State  
OH

Zip Code  
44145

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.305354

Amount of Each Receipt this Period

38.46

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

113.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

A. Jordan Miller

Mailing Address 10166 Widdington Close

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 26 2016

Transaction ID : SA11AI.302885

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jordan Miller

Mailing Address 10166 Widdington Close

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 11 2016

Transaction ID : SA11AI.304115

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jordan Miller

Mailing Address 10166 Widdington Close

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 25 2016

Transaction ID : SA11AI.305339

Amount of Each Receipt this Period

96.15

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

288.45

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Eric Rizzo**

Mailing Address 1316 Alexandria Ave.

City State Zip Code  
 Alexandria VA 22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

VP Government Affairs Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

**Transaction ID : SA11AI.302943**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eric Rizzo**

Mailing Address 1316 Alexandria Ave.

City State Zip Code  
 Alexandria VA 22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

VP Government Affairs Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2016

**Transaction ID : SA11AI.304174**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Eric Rizzo**

Mailing Address 1316 Alexandria Ave.

City State Zip Code  
 Alexandria VA 22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bank

Occupation

VP Government Affairs Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2016

**Transaction ID : SA11AI.305397**

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ROBERT Sullivan**

Mailing Address 7351 Riverpoint Ln

City State Zip Code  
 Cincinnati OH 45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bancorp

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

**Transaction ID : SA11AI.301912**

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBERT Sullivan**

Mailing Address 7351 Riverpoint Ln

City State Zip Code  
 Cincinnati OH 45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bancorp

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2016

**Transaction ID : SA11AI.303144**

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBERT Sullivan**

Mailing Address 7351 Riverpoint Ln

City State Zip Code  
 Cincinnati OH 45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fifth Third Bancorp

Occupation

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2016

**Transaction ID : SA11AI.304375**

Amount of Each Receipt this Period

57.69

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

173.07

928.11

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JENKINS FOR CONGRESS**

Mailing Address PO BOX 727

City	State	Zip Code
HUNTINGTON	WV	25711

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: WV	District: 03

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

**Transaction ID : SB23.301889**

Amount of Each Disbursement this Period

1000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCHENRY LEADERSHIP FUND**

Mailing Address 228 S WASHINGTON ST STE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

**Transaction ID : SB23.301887**

Amount of Each Disbursement this Period

2000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RATCLIFFE FOR CONGRESS**Mailing Address 2931 RIDGE RD  
PMB #217

City	State	Zip Code
ROCKWALL	TX	75032

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: TX	District: 04

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

**Transaction ID : SB23.301892**

Amount of Each Disbursement this Period

500.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN MAJORITY FUND**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

Mailing Address 901 N WASHINGTON ST, STE 700

City	State	Zip Code
ALEXANDRIA	VA	22314

**Transaction ID : SB23.301890**Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2500.00
---------

☐ Memo Item

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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☐ Memo Item

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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☐ Memo Item

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00
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6000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Citizens for Shuring Committee**

Mailing Address 330 Third Street, NW

City	State	Zip Code
Canton	OH	44702

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

**Transaction ID : SB29.301895**

Amount of Each Disbursement this Period

500.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMITTEE FOR JIM HUGHES**

Mailing Address 14 E GAY ST

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2016

**Transaction ID : SB29.301899**

Amount of Each Disbursement this Period

1500.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Cliff Rosenberger**

Mailing Address 20 S. Front Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : SB29.301901**

Amount of Each Disbursement this Period

1500.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00
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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE

### A. Friends of Faber

Category/  
Type

2500.00

 Memo Item

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

## B. Friends of Nan Whaley

MM / DD / YYYY

Category/  
Type

250.00

Memo Item

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

### C. House Democratic Caucus Fund

Category/  
Type

1000.00

 Memo Item

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

3750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Moore Capito for West Virginia**

Mailing Address PO Box 11519

City	State	Zip Code
Charleston	WV	25339

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : SB29.301902**

Amount of Each Disbursement this Period

500.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. North Carolina Bankers Association PAC**

Mailing Address PO Box 19999

City	State	Zip Code
Raleigh	NC	27619

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

**Transaction ID : SB29.301886**

Amount of Each Disbursement this Period

1500.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OHIO HOUSE REPUBLICAN ORGANIZATIONAL COMMITTEE**

Mailing Address 211 S 5TH STREET

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

**Transaction ID : SB29.301898**

Amount of Each Disbursement this Period

500.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Tom Brinkman Committee**

Mailing Address PO Box 112085

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

**Transaction ID : SB29.301884**

Amount of Each Disbursement this Period

250.00
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☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

250.00
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10000.00
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